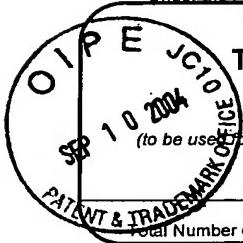


09-13-04

1fcv
PTO/SB/21 (02-04)Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

4

| | |
|------------------------|------------------------|
| Application Number | 10/696,900 |
| Filing Date | October 30, 2003 |
| First Named Inventor | Wilson et al |
| Art Unit | 1635 |
| Examiner Name | Brian A. Whiteman |
| Attorney Docket Number | GNV31AUSA/UPN-K1774CON |

| ENCLOSURES (Check all that apply) | | |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> (fifth S. I&Ds) <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">2-Documents</div> |
| Remarks | | |
| Express Mail No. ER635161340US | | |
| Customer No 00270 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|---------------------------------------|
| Firm or Individual name | HOWSON AND HOWSON Cathy A. Kodroff |
| Signature | |
| Date | September 10, 2004 |

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

| | | |
|-----------------------|--|------|
| Typed or printed name | | |
| Signature | | Date |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



GNV31AUSA/UPN-K1774CON

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. : 10/696,900 Confirmation No.: 1181
Applicant : Wilson et al
Filed : October 30, 2003
TC/A.U. : 1635
Examiner : Brian A. Whiteman
Customer No. : 00270
Title : ADENO-ASSOCIATED VIRUS SEROTYPE 1
NUCLEIC ACID SEQUENCES, VECTORS AND
HOST CELLS CONTAINING SAME

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

FIFTH SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sirs:

Applicant submits to the Examiner the attached Form PTO/SB/08B document listing and this paper pursuant to 37 CFR § 1.56 and § 1.97-1.98. Form PTO/SB/08B is attached and copies of the documents are enclosed herewith. This Information Disclosure Statement is submitted more than three months from the filing date of this application and before the receipt of a first Office Action on the merits. Therefore, no fees are believed due.

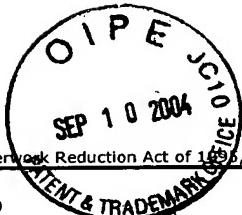
The Director is hereby authorized to charge any deficiency in any fees due with the filing of this paper or credit any overpayment in any fees to our Deposit Account Number 08-3040.

The Examiner is respectfully requested to consider the enclosed document identified in this paper and in the attached Form PTO/SB/08B during the course of examination of this application.

Respectfully submitted,

HOWSON AND HOWSON
Attorneys for Applicant

By Cathy A. Kodroff
Cathy A. Kodroff
Registration No. 33,980
Spring House Corporate Center
Box 457
Spring House, PA 19477
Phone: (215) 540-9200
Fax: (215) 540-5818



PTO/SB/08B (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

Approved for use through 07/01/2019. GPO 2009-088

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

| | | | |
|---|---|------------------------|---|
| <p>Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.</p> <p>Substitute for form 1449/PTO</p> <p>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</p> <p>(Use as many sheets as necessary)</p> | | | |
| | | | |
| Complete if Known | | | |
| Application Number | | 10/696,900 | |
| Filing Date | | October 30, 2003 | |
| First Named Inventor | | Wilson et al | |
| Group Art Unit | | 1635 | |
| Examiner Name | | Brian A. Whiteman | |
| Sheet | 1 | of | 1 |
| | | Attorney Docket Number | |
| | | GNV31AUSA/K1774CON | |

NONPATENT LITERATURE DOCUMENTS

**Examiner
Signature** _____ **Date
Considered** _____

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.

Applicant's unique citation designation number (if applicable). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 USC 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETE FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.